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Bib Data Sheet

**CONFIRMATION NO. 5117** 

<b>SERIAL NUMBE</b> 09/809,004	ĒR	FILING DATE 03/16/2001 RULE	C	<b>CLASS</b> 709	GROUP ART UNIT 2152		TUNIT	ATTORNEY DOCKET NO. 1305/23	
Christopher  ** CONTINUING D THIS APPLI  ** FOREIGN APPI  IF REQUIRED, FO	D. S DATA N CL LICA	all, Ijamsville, MD; loop, Mount Airy, MD; A************************************	)/189,88 <sup>1</sup> ****		ENTITY	**			
The conditions will yes will no was after Allowance Verified and Acknowledged Examiner's Signature Initials  ADDRESS  Roland H. Shubert  Post Office Box 2339				STATE OR COUNTRY MD	SHEETS TOT DRAWING CLAI 2		MS	INDEPENDENT CLAIMS 1	
Reston ,VA 20195 TITLE On-line data distrib		n and broadcast syster	n						
FILING FEE F	FEES: Authority has been given in Paper  No to charge/credit DEPOSIT ACCOUNT  No for following:					All Fees  1.16 Fees (Filing)  1.17 Fees (Processing Ext. of time)  1.18 Fees (Issue)  Other  Credit			